

O I P E J C 0 9 6 0
AUG 03 2004
PAULINE EISENBACH-SCHWARTZ
MAIL TRADEMARKS
Serial No.: 10/807,414
Filing Date: March 24, 2004
For: POLY-GLU, TYR FOR NEUROPROTECTIVE THERAPY

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
re Application of: Application Division
MAIL TRADEMARKS) ATTN: BOX MISSING PARTS
Serial No.: 10/807,414) Washington, D.C.
Filing Date: March 24, 2004) Confirmation No. 3865
For: POLY-GLU, TYR FOR NEUROPROTECTIVE THERAPY) August 3, 2004

LATE SUBMISSION OF FILING FEE AND/OR DECLARATION
FILED UNDER 37 CFR 1.53(b)

Mail Stop Missing Parts
Commissioner of Patents
P.O. Box 1450
Alexandria 22313-1450
Sir:

The present communication is in response to the "NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION..." dated June 3, 2004. Attached hereto is/are:

- [XX] Three (3) executed declarations in compliance with 37 C.F.R. 1.63, identifying the present application by title, serial number, filing date, and priority information.
- [XX] Application Data Sheet.
- [XX] Preliminary Amendment to the specification
- [XX] An Information Disclosure Statement with 08A-1449 and 12 references.
- [XX] Total fees in the amount of: \$1167.00.

The filing fee is calculated below:

	(Col. 1)	(Col. 2)	SMALL ENTITY			OTHER THAN SMALL ENTITY	
FOR:	NO. FILED	NO. EXTRA	RATE	FEE	OR	RATE	FEE
BASIC FEE				\$ 385.00	OR		\$
TOTAL CLAIMS	71-20	51	X 9 =	\$459.00		X 18 =	\$
INDEP. CLAIMS	9-3	6	X 43 =	\$258.00		X 86 =	\$
[] MULTIPLE DEPENDENT CLAIMS PRESENTED		+ 145 =		\$		+ 290 =	\$
If the difference in Col. 1 is less than 0, enter "0" in Col. 2			TOTAL	\$1102.00		TOTAL	\$

- [XX] Late filing of Declaration surcharge in the amount of:
Small Entity [XX] \$65.00 Other than Small Entity [] \$130.00

- [XX] Applicant claims small entity status. See 37 CFR 1.27.
- [] It is hereby petitioned for an extension of time in accordance with 37 C.F.R. 1.136(a).

The appropriate fee required by 37 C.F.R. 1.17 is calculated as shown below:

Small Entity	Other Than Small Entity
Response Filed Within	Response Filed Within
[] First - \$ 55.00	[] First - \$ 110.00
[] Second - \$ 210.00	[] Second - \$ 420.00
[] Third - \$ 475.00	[] Third - \$ 950.00
[] Fourth - \$ 740.00	[] Fourth - \$1,480.00
[] Fifth - \$1,005.00	[] Fifth - \$2,010.00
Month After Time Period Set	Month After Time Period Set

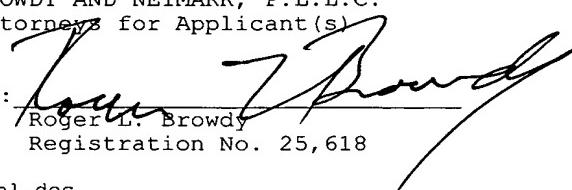
- [XX] Conditional Petition for Extension of Time:

If any extension of time for a response is required, applicant requests that this be considered a petition therefor.

- [XX] Credit Card Payment Form, PTO-2038, authorizing payment in the amount of \$1167.00 is enclosed to cover the fees.

- [XX] The Commissioner is hereby authorized and requested to charge any additional fees which may be required in connection with this application or credit any overpayment to Deposit Account No. 02-4035. This authorization and request is not limited to payment of all fees associated with this communication, including any Extension of Time fee, not covered by check or specific authorization, but is also intended to include all fees for the presentation of extra claims under 37 CFR 1.16 and all patent processing fees under 37 CFR 1.17 throughout the prosecution of the case. This blanket authorization does not include patent issue fees under 37 CFR 1.18.

BROWDY AND NEIMARK, P.L.L.C.
Attorneys for Applicant(s)

By: 
Roger L. Browdy
Registration No. 25,618



Page 1 of 2 Pages [X] Original [] Substitute [] Supplemental Atty. Docket: EIS-SCHWARTZ21A

Combined Declaration for Patent Application and Power of Attorney

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; and that I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

POLY-GLU, TYR FOR NEUROPROTECTIVE THERAPY

the specification of which (check one)

- [] is attached hereto;
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U.S. Appln. No. _____ *; or
[] was/will be filed in the U.S. under 35 U.S.C. §371 by entry into the U.S. national stage of an international (PCT) application, PCT/_____; filed _____ entry requested on _____ *; national stage application received U.S. Appln. No. _____ *; §371/§102(e) date _____ *
(* if known)

and was amended on _____ (if applicable).

(include dates of amendments under PCT Art. 19 and 34 if PCT)

I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above; and I acknowledge the duty to disclose to the Patent and Trademark Office (PTO) all information known by me to be material to patentability as defined in 37 C.F.R. §1.56.

I hereby claim foreign priority benefits under 35 U.S.C. §§ 119 (a)-(d) and 365 (b) of any prior foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or under §365(a) of any PCT application which designated at least one country other than the U.S., listed below:

Application No.	Country	Filing Date (MM/DD/YYYY)
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I hereby claim the benefit under 35 U.S.C. §119(e) of any United States provisional applications listed below:

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60/527,772	12/09/2003

I hereby claim the benefit under 35 U.S.C. §120 of any prior U.S. non-provisional application(s) or under §365(c) of any prior PCT international application(s) designating the U.S., listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in such U.S. or PCT international application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose to the PTO all information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

Application No.	Filing Date (MM/DD/YYYY)	Status (patented, pending, abandoned)
09/893,344	06/28/2001	Pending
PCT/IL2004/000008	01/06/2004	Pending
PCT/IL02/00979	12/05/2002	Pending

As a named inventor, I hereby appoint the following registered practitioners to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

All of the practitioners associated with Customer Number 001444

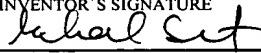
Direct all correspondence to the address associated with Customer Number 001444, which is presently:

BROWDY AND NEIMARK, P.L.L.C.
624 Ninth Street, N.W.
Washington, D.C. 20001-5303
(202) 628-5197

Title: POLY-GLU, TYR FOR NEUROPROTECTIVE THERAPYU.S. Application filed _____, Serial No. _____
PCT Application filed _____, Serial No. _____

The undersigned hereby authorizes the U.S. Attorneys or Agents appointed herein to accept and follow instructions from Ben-Ami & Associates as to any action to be taken in the U.S. Patent and Trademark Office regarding this application without direct communication between the U.S. Attorneys or Agents and the undersigned. In the event of a change of the persons from whom instructions may be taken, the U.S. Attorneys or Agents appointed herein will be so notified by the undersigned.

I hereby further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. §1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME OF FIRST INVENTOR Michal EISENACH-SCHWARTZ	INVENTOR'S SIGNATURE 	DATE 3.6.04
RESIDENCE Rehovot, Israel	CITIZENSHIP Israel	
POST OFFICE ADDRESS 5 Rupin Street, Rehovot, Israel 76353		
FULL NAME OF SECOND JOINT INVENTOR Ester YOLES	INVENTOR'S SIGNATURE	DATE
RESIDENCE D.N Nahal Sorek, Israel	CITIZENSHIP Israel	
POST OFFICE ADDRESS 94 Moshav Beit Gamliel, D.N. Nahal Sorek, Israel 76880		
FULL NAME OF THIRD JOINT INVENTOR Ehud HAUBEN	INVENTOR'S SIGNATURE	DATE
RESIDENCE Hadera, Israel	CITIZENSHIP Israel	
POST OFFICE ADDRESS 38 Ha'alon Street, Hadera, Israel 38244		
FULL NAME OF FOURTH JOINT INVENTOR	INVENTOR'S SIGNATURE	DATE
RESIDENCE	CITIZENSHIP	
POST OFFICE ADDRESS		
FULL NAME OF FIFTH JOINT INVENTOR	INVENTOR'S SIGNATURE	DATE
RESIDENCE	CITIZENSHIP	
POST OFFICE ADDRESS		
FULL NAME OF SIXTH JOINT INVENTOR	INVENTOR'S SIGNATURE	DATE
RESIDENCE	CITIZENSHIP	
POST OFFICE ADDRESS		

ALL INVENTORS MUST REVIEW APPLICATION AND DECLARATION BEFORE SIGNING. ALL ALTERATIONS MUST BE INITIALED AND DATED BY ALL INVENTORS PRIOR TO EXECUTION. NO ALTERATIONS CAN BE MADE AFTER THE DECLARATION IS SIGNED. ALL PAGES OF DECLARATION MUST BE SEEN BY ALL INVENTORS.



Page 1 of 2 Pages [X] Original [] Substitute [] Supplemental Atty. Docket: EIS-SCHWARTZ21A

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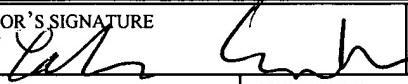
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RESIDENCE Rehovot, Israel	CITIZENSHIP Israel	
POST OFFICE ADDRESS 5 Rupin Street, Rehovot, Israel 76353		
FULL NAME OF SECOND JOINT INVENTOR Ester YOLES	INVENTOR'S SIGNATURE 	DATE 31.05.04
RESIDENCE D.N Nahal Sorek, Israel	CITIZENSHIP Israel	
POST OFFICE ADDRESS 94 Moshav Beit Gamliel, D.N. Nahal Sorek, Israel 76880		
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